



# City of Winchester, Virginia

Commissioner of the Revenue  
Rouss City Hall, P. O. Box 706  
Winchester, Virginia 22604  
540-667-1815  
Fax 540-667-8937

For office use only:

Control number: \_\_\_\_\_

License number: \_\_\_\_\_

## **APPLICATION FOR NEW ACCOUNT**

Meals, Motel, Admissions, and Rental Tax  
(City of Winchester Code, Chapter 27, Articles VI, VII, XII, and XIV)

Business location: \_\_\_\_\_

Name of business  
**as advertised:** \_\_\_\_\_

Full mailing address: \_\_\_\_\_

Date opened: \_\_\_\_\_ Business license #: \_\_\_\_\_

Type of business: \_\_\_\_\_

Application for: (check all applicable)			
_____ Meals Tax	_____ Admissions	_____ Rental Tax	_____ Motel Tax

Federal tax ID#: \_\_\_\_\_ State sales tax ID#: \_\_\_\_\_

Type of ownership			
Circle one/list type:	Sole proprietor _____	Partnership _____	Corporation _____

Business phone: \_\_\_\_\_ Emergency phone: \_\_\_\_\_

Legal name of owner: \_\_\_\_\_

### **(List the Individual, partnership, or corporation name.)**

If business name is not the owner's full individual, partnership, or corporate name, it must be registered in the office of the Clerk of the Circuit Court for the City as an "assumed" or "fictitious" trade name.

Applicant  
name and title\*: \_\_\_\_\_

Full address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Social security number: \_\_\_\_\_

**The City of Winchester must be notified of any ownership changes. Separate accounts are required for each business location.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\* If the applicant is not the sole owner of the business, please complete the following page.

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**Additional owner information**

Officer  
name and title: \_\_\_\_\_

Full address: \_\_\_\_\_  
\_\_\_\_\_

Home phone: \_\_\_\_\_ Social security number: \_\_\_\_\_

Officer  
name and title: \_\_\_\_\_

Full address: \_\_\_\_\_  
\_\_\_\_\_

Home phone: \_\_\_\_\_ Social security number: \_\_\_\_\_

Officer  
name and title: \_\_\_\_\_

Full address: \_\_\_\_\_  
\_\_\_\_\_

Home phone: \_\_\_\_\_ Social security number: \_\_\_\_\_

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